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1904 - ANNIVERSARY - 1954

M.S.N.A.

THE MICHIGAN Nurse

Official Organ of the Michigan State Nurses Association

VOLUME 27 NOVEMBER 1954 NUMBER 8

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Dates Ahead

Nov. 20: Michigan Tuberculosis Association, Detroit.

Dec. 1-3: American Hospital Association, Institute for Operating-Room Supervisors, Omaha.

Dec. 13-17: American Congress on Obstetrics and Gynecology, Chicago.

1955

Jan. 20-22: Michigan Health Council, Rural Health Conference, East Lansing.

Feb. 9-11: American Protestant Hospital Association, Chicago.

Apr. 18-21: American Hospital Association, Institute on Operating — Room Administration Services, Washington, D. C.

THE MICHIGAN NURSE

Official Organ of the
Michigan State Nurses Association
353 Hollister Building
Lansing 8, Michigan

President: Florence C. Kempf, East Lansing
1st Vice President: Phyllis MacKay, Grand Rapids
2nd Vice President: Sister M. Benedicta, Kalamazoo
Secretary: Eleanor A. Dryer, Lansing
Treasurer: Evelyn C. Andersen, Detroit
Headquarters Staff: Hazel Gabrielson, R.N., *Executive Director;* Mrs. Emma J. Antcliff, R.N., *Assistant Executive Director;* Florence E. Haldeman, R.N., *Public Relations Consultant and Managing Editor;* Freeda Haynes, *Office Manager.*

COMMITTEE ON PUBLICATIONS

Ann Reynolds, Chairman
Mary E. Blackburn, Helen I. Brooks, Marjorie Kinney, Mrs. Lucile Van Horn, Mrs. Angie Van Hoven and Pearl Weatherhead.

Published monthly, except February, July and August, by the Michigan State Nurses Association, 353 Hollister Bldg., Lansing 8, Michigan, and entered at the post office at Lansing, Michigan, as second class mail under the act of March 3, 1879. Subscription price $1.50 per year.

Editorial

SONG OF THANKSGIVING

One particular song which pertains to this season has held a very special meaning for me ever since I was a member of my "training" school Glee Club.

This 1625 song was sung by the Pilgrims. Even though it would seem to be more meaningful for them than it does for nurses today, listen to the old familiar words of this hymn:

"We gather together to ask the Lord's blessing:
He chastens and hastens His will to make known,
The wicked oppressing now cease them from distressing,
Sing praises to His name He forgets not His own."

We have just "gathered together" to celebrate our 50th year of organized nursing. We have asked the "Lord's blessing" for the continuation of a progressive organization. We hope we have "made His will known" by upholding the Christian-like standards of nursing.

In every issue of this past year's MICHIGAN NURSE, we have paid tribute to all those who have contributed so much to organized nursing in Michigan. We have, in a way, expressed our thankfulness for the MSNA.

The staff of the MICHIGAN NURSE has gone beyond the call of duty to review the history of your organization, to condense it, and to present the written account to each nurse in Michigan.

Each cover holds some special significance to our organization. The first cover (January issue) depicts our very latest step in progress — a picture of section chairmen. The very last covers show the modern day Florence Nightingale and her lamp.

Let us pay tribute to those who have served us so well in guiding our organization during the past year, and as a professional nursing organization, should we not —

"Sing praises to His name He forgets not His own."

— Mrs. Lucile Van Horn, R.N.

EDITOR'S NOTE: *We have made errors in the listing of the MSNA presidents, page 124, of the October issue of the MICHIGAN NURSE. MRS KATHLEEN YOUNG SANDS, Detroit, was the president in 1946 and not Gertrude Nathe as listed; RHODA F. REDDIG, Ann Arbor, was president in 1949 and not Helene Buker as listed.*

PREVIEW — December Issue

Convention Reports

THE PRESIDENT'S ADDRESS — "WHAT CAN WE DO?"

50th Annual Convention, Nov. 1, 1954

By FLORENCE C. KEMPF, R. N.

Conventions give us an opportunity to become acquainted with each other, to share experiences, to think together and perhaps find some answers to our common problems. Michigan nurses from every part of the state have now been holding annual meetings for fifty years, they have received inspiration and moral support from each other, they have grown in their sense of unity which has made for progress. Might this be the time to examine our position as an organization; our growth as professional women? An organization is only as strong as the persons who comprise it: the progress it can make will be determined by the number of persons who are working together toward agreed upon objectives. Would an informed objective observer say that nurses quite consistently demonstrate intellectual and emotional maturity in their combined efforts for organizational development? Intellectual maturity means capacity for and practice in reasonable thinking and behavior — withholding judgments and decisions until the informations that relate have been secured and examined — respect for facts, but recognizing that what is true today may be disproven tomorrow.

Do we nurses suspend judgment until the data has been accumulated? Are we flexible in our opinions? Do we demonstrate a willingness to change our minds and ways of doing to keep in step with the new discoveries in human relations as well as in the scientific fields? Intellectual maturity represents these qualities.

The person who is a member of one of the social professions is, to quote Isabel Stewart, "expected to do her own thinking" based on the command of subject matter, plan and "supervise her own work," and "maintain high standards of service." These are high expectations of ordinary human beings. Would you not agree? And they are only possible in a climate of freedom — does this climate exist in the areas where we work? Are we promoting, encouraging and living the attitudes and actions of citizens in a free world? Intellectual maturity imposes obligations, also privileges when they are earned. It represents a goal never fully achieved but always challenging our best thoughts and efforts. Emotional maturity, the personality determinant, is realistic and sees in perspective the self to others, the past to the present. Faith in God, in self, in the goodness of people makes serenity possible so that reasoning can guide our behaviors.

How can we blend the predominant characteristics reflected in our daily reactions into a sound organizational pattern? Are our objectives clearly defined? Are we thinking and working cooperatively? Are we inspired by kindly feeling as we seek change for the difficult situations in which nurses often function? What percentage of professional registered nurses in the State of Michigan are actively helping in making MSNA the organization representative of all Michigan nurses? Do we bring intellectual and emotional maturity to our responsibilities of organizational membership and participation?

Many of you have read Walt Whitman's "Song of Myself" from which I have selected a short quotation, "In all people, I see myself, none more and not one a barley corn less. And the good or bad I say of myself I say of them." This reminds me that only self-understanding can help me understand others — the place to begin examination then as we strive to grow in intellectual and emotional maturity, which qualities are basic to professional nursehood and organization, is with ourselves.

Virgil M. Hancher, president of the State University of Iowa, in an address honoring new members of Phi Beta Kappa last year selected as his subject, "The Unexamined Life." It was one of the most inspiring addresses I have had the pleasure of reading recently. The paragraph I have selected questions the University's goals — such examination applies equally well to a professional organization. "What do you wish this University to be ten years, a hundred years, a thousand years from now? Do you wish it to teach the ways of right and freedom or the art of 'double think'? Do you wish it to produce only better tools and better technicians or to produce men and women reflecting the Glory of God? This is your choice. Only the examined life can make the right choice. Greek, Jew, and Christian can unite in their belief that the 'unexamined life is not worth living.' But the 'examined life' can be the noblest work of man!"

The conclusion I draw from these words is that the stature, we, the members of the Michigan State Nurses Association, can achieve as people will determine the contribution of our organization to nurses and nursing in the future fifty years.

MSNA RETIREMENT PLAN

By ROYAL L. BROWN

MSNA Security and Retirement Counselor

(EDITOR'S NOTE: *This is the second article on Retirement Insurance to appear in the* MICHIGAN NURSE *this fall. Refer to page 114, September issue, for the introduction to this article.)*

Practically everyone hopes to be able to retire some day, but like the weather, only a smart few try to do anything about it.

Yes, you can do something about the weather. You can control the temperature in your home and place of employment by use of modern air conditioning devices. Of course you cannot control the weather in a large sense, but you can provide comfort as far as you, individually, are concerned. That is what counts. Retirement is a personal matter too, and by employing modern methods you can control it to fit your individual requirements. Your MSNA Retirement Plan is the modern method of guaranteeing comfortable retirement years for you.

Very briefly, the MSNA Retirement Plan is a methodical means of accumulating a sum of money for future use having, as a part of the contract, the privilege of using that sum to provide a certain monthly income, guaranteed for as long as you live.

If you want an active retirement, you will need and want regular guaranteed monthly income for the rest of your life; the next question to be answered is, how is this income to be produced? Simple and easy — through systematic savings. Your first step is to decide how much you can and are willing to set aside for yourself every month. You then set up your Retirement Plan accordingly. Premiums may be sent to the Insurance Company every month, every three or six months, or annually, whichever is most convenient for you. You decide which method you prefer and from then on, the company sends you a notice when your next deposit is due; just a reminder that you owe yourself some more money. If, at a later date, you decide you want to change the method, the company will cooperate with you.

Suppose that some month you find you have some extra cash, you may send it along to the company to be placed in the Advance Deposit Fund where it bears 2½ per cent interest. The best feature of this fund is that you are not so apt to withdraw it and spend it foolishly. One nurse requested a withdrawal of $300.00 from her fund. When I called to tell her I had the check, she asked me to send it back because, during the three days it took to get it, she had decided not to make a certain purchase she had planned. She told me she was glad she didn't have the money in the bank where it could have been more quickly withdrawn.

What about that income mentioned previously? How is it produced and why is the Retirement Plan different from any other method of saving? Here is the answer.

When the time comes that you want to take it easy and retire, you will have accumulated a large sum of money. This is the most important feature of the Plan — THEN you decide what you will do with that money! You may withdraw all of the cash, or you may take a guaranteed monthly income for the rest of your life (your policy shows the amount you are guaranteed). Circumstances may require that you withdraw part of the cash and leave the balance to pay you an income. The important point is that you do not have to make any decisions until the time comes and you know what your requirements are. If you decide on income, you will receive it as long as you live without any investment worries on your part.

You may retire any time you want to. You do not have to wait until you are 65. On the other hand, you may continue saving until 70, if you so desire. The plan is flexible.

Let us now assume that you accumulated $10,000 through the MSNA Retirement Plan, and that your health is good and you want to take income for the rest of your life. Beginning immediately, the Insurance Company will send you a check every month in the amount of $56.10. You get it every month just as you did when you were earning. You won't have to try to spead an annual check over the next year as you would if you were getting your income from another capital and interest method. You do not have any investing problems because the Insurance Company's expert investors take care of all that for you. The Retirement Plan looks like the easier and more practical means of providing for those important years, doesn't it?

Your Retirement Plan is designed to cover situations that may arise in later years. It provides for cash that may be used in emergencies. The money withdrawn may be re-deposited at your convenience. You may stop your regular deposits and leave (with interest) what you already have to your credit. Circumstances may make it necessary to cut down on the amount you can save. You may do so and leave that proportionate amount to your credit to grow at interest, continuing the balance of the plan to maturity. These privileges are important to nurses who are married or are contemplating marriage. Of course, we recommend that you continue your plan after you are married, even if it is necessary to work part time to keep up your deposits. After all, it is an ideal way of saving and certainly you will want to save money for the use of yourself and husband in later years. It could also be used for an educational fund for your children. In fact, it's your money and you will find many ways to use it to make your life happier.

If you leave nursing or move to another state, you may continue your plan. The only stipulation is that you must be a member of the Association at the time you apply for the Plan.

We have been referring to the Retirement Plan as a savings plan. Before ending this

article, some figures proving this point should be appropriate. A nurse starting her plan at age 25 and making deposits of $120.00 per year (which is only $10.00 per month) will have total guaranteed cash of $6,272.00 at the age of 65. Her total deposits will be $4,800.00. That means that she will get back $1,472.00 more than she puts in, plus any dividends she has left to accumulate. It is a good savings plan.

There is a great deal more that could be written about your MSNA Retirement Plan. Your Association's counselors and advisors will go into that when they help you work out your own individual plan. I hope that I have been able to show that your Association, in sponsoring this plan, has your welfare at heart. Whether you are young or old, single or married, it is a real savings plan that will make your life a great deal happier if you give it a chance.

Professional Nurses Actively Registered in Michigan as of April, 1954 Renewals:

In Nursing Education and Nursing Service in Michigan:

Advanced Nursing Education or Basic Collegiate Program	83	
Diploma Schools of Nursing	407	
Doctor's Office or Clinic	1,424	
Hospital Staff	6,740	
Hourly Nursing	339	
Industrial Nursing	1,147	
Private Duty	1,487	
Public Health	848	
TOTAL	12,475	

In Related Fields in Michigan:

American Red Cross	91	
Anesthesia	273	
Government Service	181	
Psysiotherapy	30	
Police Woman	7	
Record Librarian	16	
Registrar	18	
Social Service	37	
Stewardess	1	
Post Graduate Clinical Course	7	
Volunteer Work	90	
X-Ray or Laboratory	46	
TOTAL	797	

In Nursing Outside of Michigan:

Actively engaged	6,669	

Not Engaged in Nursing:

Attending College or University	110	
Retired Permanently	498	
Unemployed, but would like work	128	
Unable to do nursing (family, health, etc.)	7,041	
Other (clerk, schoolteacher, etc.)	880	
TOTAL	8,657	
NO REPORT	2,143	
TOTAL NUMBER RENEWALS		30,741

New Registrants for 1954:

By Examination	953	
By Endorsement	247	
TOTAL NUMBER NEW REGISTRANTS		1,200
GRAND TOTAL		31,941

VOLUNTEER WORKERS

There are hundreds of tasks to be done in order to have a smooth running convention. These members, from the Detroit District, of the Sub-Committees of the Arrangements Committee contributed a great deal to the success of our convention.

Sub-Committee on Decorations
- Doris Beach, chairman
- Mrs. Clara Bailey
- Mrs. Dorothy Butterfield
- Betty Evans
- Mrs. Isabella Hiester
- Norma Hopper
- Mrs. Madonna Lauth
- Mrs. Dolores Nicholson
- Flora Priehs
- Marie Tiberti
- Dolores Zychowicz

Sub-Committee on Films
- Mrs. Laura Campbell, chairman
- Irene Beland
- Mrs. Pauline Remmele
- Rozella Schlotfeldt
- Mrs. Cheralyn Trottier
- Helen Wenning

Sub-Committee on Hostesses
- Mrs. Adelia Gillies, chairman
- Virginia Streeter, co-chairman
- Dorothy Coye
- Mrs. Christine Crenshaw
- Cleo Davisson
- Margaret Geierman
- Mrs. Besse Ketcham
- Elizabeth Martin
- Mrs. Dolores Nicholson
- Mrs. Frances Osborn
- Mrs. Helen Ronan
- Mrs. Leona Sleeper
- Mary Smith
- Eleanor Taylor

Sub-Committee on Registration
- Mrs. Evelyn Fosha, chairman
- Wanda Chesner
- Mrs. Seigler Clore
- Mrs. Josephine Creutz
- Agnes Demarois
- Mrs. Theressa Dixon
- Mrs. Grace Gelenger
- Margaret Gettle
- Annie Huffman
- Mrs. Katherine Laughlin
- Gertrude Murdie
- Mrs. Eleanor Paynter
- Mabel Pittsley
- Mrs. Grace Turner

In Memoriam

Mrs. Hazel Campbell McMahon died in October at the Tahquamenon General Hospital after a long illness. Mrs. McMahon was a lifelong resident of Newberry. She was a graduate of Newberry State Hospital Training School and the Canadian Sault General Hospital.

For several years, she served as chairman of the Luce County chapter of the Infantile Paralysis Foundation, and was active in American Legion Auxiliary.

—*Newberry News*

State Section Activities

EACT *(Educational Administrators, Consultants & Teachers)*

These are the officers for 1954-1955:

Chairman: Mrs. Ethel MacLennan, assistant director, Hurley Hospital School of Nursing, Flint (term: 1954-1956).

1st Vice Chairman: Inez T. Smith, practical nursing education consultant, Office of Vocational Education, Dept. of Public Instruction, Lansing (term: 1953-1955).

2nd Vice Chairman: Charlotte H. Stenger, clinical instructor, Mercy Central School of Nursing, Bay City Unit (term: 1954-1956).

Secretary: Dorothy Aird, assistant director of nursing education, Grace Hospital, Detroit (term: 1953-1955).

Member-at-large: Grace Siebers, instructor pediatric nursing, Dept. of Nursing Education, Michigan State College, East Lansing (term: 1954-1956).

Member-at-large: Rachel Christie, director of nursing, Mercy Hospital, Benton Harbor (term: 1953-1955).

Nominating Committee (1 year term):
Helen C. Downs, Iron Mountain
Esther Kreider, Kalamazoo
Helen D. Wenning, Detroit

GDN *(General Duty Nurses)*

These are the officers for 1954-1955:

Chairman: Mrs. Mabel Cooley, general duty, Maybury Sanatorium, Northville (term: 1954-1956).

1st Vice Chairman: Mrs. Kathryn J. Laughlin, head nurse, Receiving Hospital, Detroit (term: 1954-1955).

2nd Vice Chairman: Barbara E. Swanebeck, general duty, McLaren General Hospital, Flint (term: 1954-1956).

Secretary: Mrs. Mary E. Frost, general duty, Kalamazoo State Hospital, Kalamazoo (term: 1954-1955).

Executive Committee: Mrs. Magdalena Davis, head nurse, Leila Y. Post Montgomery Hospital, Battle Creek (term: 1954-1956).

Executive Committee: Mrs. Madonna J. Lauth, head nurse, East Side General Hospital, Detroit (term: 1954-1955).

Nominating Committee (1 year term):
Mrs. Hilda C. Connell, Lansing
Mrs. Leona Sleeper, Detroit
June A. Wehner, Grand Rapids

INSA *(Institutional Nursing Service Admistrators)*

These are the officers for 1954-1955:

Chairman: Dolores A. Keyser, director of nursing, W. A. Foote Memorial Hospital, Jackson (term: 1954-1956).

1st Vice Chairman: Rita Radzialowski, associate director of nursing and coordinator of the educational programs for nursing service personnel, Harper Hospital, Detroit (term: 1953-1955).

2nd Vice Chairman: Sister Mary Aniceta, supervisor, St. Mary's Hospital, Marquette (term: 1954-1956).

Secretary: Lillian Hannig, assistant to the director, nursing service, University Hospital, Ann Arbor (term: 1953-1955).

Member-at-large: Frances L. Benson, supervisor, McLaren General Hospital, Flint (term: 1954-1956).

Member-at-large: Frances Kobe, Calumet (term: 1953-1955).

Nominating Committee (1 year term):
Mrs. Vera Burke, Saginaw
Dorothy J. Donnelly, Battle Creek
Agnes R. Kinney, Grand Rapids

PDN *(Private Duty Nurses)*

These are the officers for 1954-1955:

Chairman: Mary E. Bird, private duty, Flint (term: 1954-1956).

1st Vice Chairman: Mrs. Esther Backman, private duty, Jackson (term: 1954-1955).

2nd Vice Chairman: Mrs. Bernice A. Bossemeyer, private duty, Ann Arbor (term: 1954-1956).

Secretary: Mrs. Elsie Clark, private duty, Lansing (term: 1954-1955).

Member-at-large: Mrs. Alice C. Rathman, private duty, Ann Arbor (term: 1954-1956).

Member-at-large: Elaine Hylland, private duty, Muskegon (term: 1954-1955).

Nominating Committee (1 year term):
Mrs. Mildred A. Dilks, Detroit
Mrs. Marvle Rayburn, Ann Arbor
Mrs. M. Bernice Smith, Lansing

PHN *(Public Health Nurses)*

These are the officers for 1954-1955:

Chairman: Josephine Brown, director of nursing division, Calhoun County Health Dept., Battle Creek (term: 1954-1956).

1st Vice Chairman: Nancy McMurray, assistant supervising nurse, Washtenaw County Health Dept., Ann Arbor (term: 1954-1955).

2nd Vice Chairman: Anita M. Kotila, public health staff nurse, Delta-Menominee District Health Dept., Escanaba (term: 1954-1956).

Secretary: Mrs. Loraine Black, assistant supervisor, Oakland County Health Dept., Pontiac (term: 1954-1955).

Executive Committee: Mildred Cardwell, nursing director, Lansing-Ingham County Health Dept., Lansing (term: 1954-1956).

Executive Committee: Mrs. Mildred Drury, public health nursing consultant, Michigan Dept. of Health, Lansing (term: 1954-1955).

Nominating Committee (1 year term):
Mrs. Adelia Gillies, Detroit
Laura E. Smith, Sault Ste. Marie
Mildred Spellman, Lansing

SG *(Special Groups)*

These are the officers for 1954-1955:

Chairman: Mrs. Thelma Brewington, executive director, Detroit District Nurses Association, MSNA (term: 1954-1956).

1st Vice Chairman: Vera Atchinson, charge of schedules, Detroit Memorial Hospital, Detroit (term: 1954-1955).

2nd Vice Chairman: Vivian D. Kohls, industrial nurse, Auto-Lite Battery Corp., Owosso (term: 1954-1956).

Secretary: Anna Smith, office manager, Port Huron Hospital, Port Huron (term: 1954-1955).
Executive Committee: Mrs. Doris Passow, director, Community Nursing Bureau, Saginaw (term: 1954-1956).
Executive Committee: Nella DeJongh, industrial nurse, Hart and Cooley Manufacturing Co., Holland (term: 1954-1955).
Nominating Committee (1 year term):
Arah Beyschlag, Detroit
Julia Koops, Grand Rapids
Jane Russell, Detroit

WE ARE PROUD TO ANNOUNCE

These Michigan nurses have articles in a national professional magazine.

"The Problem of Extended Illness and Old Age — The Nurse In An Official Agency" — by Patricia Walsh, director of Washtenaw County Health Dept., in the *American Journal of Nursing*, October, 1954.

"The Person-Centered Approach" — by Florence C. Kempf, professor of nursing education at Michigan State College, in the October 1954, *American Journal of Nursing*.

"Working and Learning Together" — by Rita Radzialowski, associate director of nursing and coordinator of the educational programs for nursing service personnel at Harper Hospital, in the September, 1954, *American Journal of Nursing*.

Worth Repeating

LADDER OF SUCCESS

100% — I did.
90% — I will.
80% — I can.
70% — I think I can.
60% — I might try.
50% — I suppose I should.
40% — What is it?
30% — I wish I could.
20% — I don't know.
10% — I can't.
0% — I won't.

"Shop Talk"
St. Lukes Hospital, Marquette

ANNOUNCEMENT

It is with deep regret that the Board of Directors of the West Virginia State Nurses' Association announces the resignation of May M. Maloney, R.N., on Aug. 2, 1954, as executive director, after 19 years of devoted service, and her retirement from active nursing because of ill health.

Gladyce Garst, R.N., president of the West Virginia State Nurses' Association, announced that the Board of Directors has selected Juliann Ritter, R.N., as executive director, effective Sept. 15.

ELBA MORSE HONORED

Senator Charles Potter on Sept. 27 presented the third annual Charles Potter Award for aiding the handicapped to Elba Morse of Marquette, 1952 "Nurse of the Year," at the Michigan Rehabilitation Conference in Grand Rapids. She is a former president of MSNA.

— *Detroit Free Press*

UNIVERSITY OF MICHIGAN

Rhoda Reddig, R.N., director of the School of Nursing, University of Michigan, has announced the appointment of Agnes Love as assistant director of the school and associate professor of nursing.

Miss Love is a graduate of the University of Minnesota School of Nursing and holds a Master of Science degree from the University of Chicago. She has had a varied experience in nursing practice and nursing education and has been on the University of Minnesota faculty since 1943, and chairman of their Basic Curriculum Committee since 1949.

HELP FIGHT TB

In spite of the parade of headlines hailing advances against tuberculosis, as most MICHIGAN NURSE readers know, this disease remains unconquered. As evidence of this fact, records show more than 5,600 new TB cases reported in Michigan last year — more than 100 each week! For more than 40 years, your tuberculosis association has been in the forefront of the battle against TB. The association is supported by the annual sale of Christmas Seals, this year running from Nov. 22 through Christmas day. Readers of the MICHIGAN NURSE are urged to give generously for Christmas Seals this year. Let's keep up Michigan's pacemaking advance against this No. 1 communicable disease.

Did you know: that each sheet of your 1954 Christmas Seals shows 250 children? Count them. Buy them. Use them. Help stamp out tuberculosis.

NATIONAL HEALTH

The National Health Conference has undertaken a comprehensive project called: "Operation Health Career Horizons." The purpose of this project will be to inform young people in the 26,000 high schools throughout the nation of the wide range of opportunities in careers in health.

With the support of the Equitable Life Assurance Society, the National Health Council will distribute publications to the nation's schools.

NEW PUBLICATION

"The Adolescent in Your Family" published in October by the Children's Bureau, Dept. of Health, Education, and Welfare, completes the series of bulletins developed over the years by the Bureau to help parents in their relationships with their children through all the stages of growth.

EXECUTIVE BOARD MEETING — GRAND HAVEN, 1909.

Mrs. Anna Barbara Switzer (fifth from the left) was the oldest MSNA president attending the 50th Anniversary Convention.

Mrs. Susan Fisher Apted (third from the left) and Fantine Pemberton (seventh from the left) were past presidents of MSNA.

Linda Richards (second from the left) was America's first trained nurse.

Incidentally, the man in the picture is Fred Schneider, who was a representative from Berrien County and offered great assistance to MSNA in its efforts to secure registration for nurses.

WE HONOR THESE NURSES WHO HAVE GIVEN 50 YEARS OF SERVICE TO THE PROFESSION

Lulu L. Cudney — Grand Rapids
Mrs. Emma Nelson Embree — Battle Creek
Marie Graessley — Monroe
Mrs. Nancy Edna Ashmun Rae — Essexville
Mary Schermerhorn — Grand Rapids
Mrs. Margaret Walde Sheldon — Battle Creek
Sister Florentine — Nazareth
Sister John — Nazareth
Sister M. Leonard — Kalamazoo
Sister M. Ligouri — Manistee
Sister Margaret — Nazareth
Sister M. Patrick — Grand Rapids
Mrs. Petronell P. Spencer — Battle Creek.
Leone Sweet — Kalamazoo
Sara A. Vail — Battle Creek
Mrs. Marian Burns Wilcox — Sunfield

MSNA BOARD OF DIRECTORS

Officers: (1954-1955)

President: Florence C. Kempf, professor of nursing, Michigan State College, East Lansing (term: 1953-1955).

1st Vice President: Phyllis MacKay, director of student health service at Mercy Central School of Nursing, Grand Rapids (term: 1954-1956).

2nd Vice President: Sister Mary Audrey, R.S.M., nurse administrator, St. Lawrence Hospital, Lansing (term: 1954-1956).

Secretary: Eleanor A. Dryer, private duty, Lansing (term: 1953-1955).

Treasurer: Evelyn C. Andersen, head nurse, Herman Kiefer Hospital, Detroit (term: 1954-1956).

Director: Mrs. Lucile Van Horn, Hillsdale College Health Service, Hillsdale (term: 1954-1957).

Director: Mrs. Myrtle Devereaux, supervising nurse, Social Hygiene Division, Dept. of Health, Detroit (term: 1953-1956).

Director: Mildred C. McFerren, director of nursing, Grace Hospital, Detroit (term: 1952-1955).

The chairmen of the state sections are also members of the Board of Directors (term: 1954-1956):

EACT — Mrs. Ethel MacLennan, Flint
GDN — Mrs. Mabel Cooley, Northville
INSA — Dolores A. Keyser, Jackson
PDN — Mary E. Bird, Flint
PHN — Josephine Brown, Battle Creek
SG — Mrs. Thelma Brewington, Detroit

Elected members of the Committee on Nominations (1 year term):

Mrs. Antoinette K. Bowling, Bay City
Mrs. Mabel Lyons, Marquette
Evelyn Anne Newton, Grand Rapids
Mrs. Kathleen Young Sands, Detroit

PROCEDURE FOR CONDUCTING HEARING HELD BY MICHIGAN BOARD OF NURSING

Under authority of Act. No. 197 of the Public Acts of 1952, as amended by Act No. 103 of the Public Acts of 1953, and pursuant to Act 319 P.A. 1909, as amended, the following rules and regulations with respect to the procedure to be followed at all official hearings conducted by the MICHIGAN BOARD OF NURSING ARE hereby promulgated:

I. Notification of any hearing before the MICHIGAN BOARD OF NURSING will be served according to Section 12 Act 319, P.A. 1909 as amended and will state the date, time, place, issues involved and reasons for holding said hearing. Such notice will be served at least thirty (30) days prior to date of said hearing.

II. When an appearance is made at a hearing, it shall be made either in person or by a duly authorized representative, or by counsel.

III. The person or persons who have been served with a notice of hearing may, at his option, file a written answer thereto prior to the date set for hearing, or at said hearing may appear and present an oral statement on the charges contained in the notice of hearing. When written briefs or arguments are presented, a copy shall be served upon the MICHIGAN BOARD OF NURSING and opposite parties at least ten (10) days prior to the date set for the hearing.

IV. If the person or persons who have been previously served with a notice of hearing fail to appear at a noticed hearing, the MICHIGAN BOARD OF NURSING, may proceed with a hearing of the cases brought before it and may, on the evidence presented, make its decision.

V. When a hearing is requested, the party requesting the hearing shall submit in writing a fair and accurate statement of the facts to the MICHIGAN BOARD OF NURSING and all interested parties. The facts shall be accepted as evidence unless a written answer is filed denying said facts and stating new facts relied upon with the MICHIGAN BOARD OF NURSING and all interested parties.

VI. No hearing shall be adjourned or continued, except upon an order of MICHIGAN BOARD OF NURSING. All motions and requests for an adjournment, or a continuance, shall be in writing, which instrument shall state concisely the reasons why an adjournment or continuance is necessary. No motion or request for an adjournment or continuance will be considered unless the same is filed with the MICHIGAN BOARD OF NURSING at least five (5) days prior to the date assigned for the hearing of the application, complaint or petition, except upon order of the MICHIGAN BOARD OF NURSING, which exception will be granted only upon a showing that for reasons not within the control of the person or party making the motion or request, the motion or request could not be filed within the time limited.

VII. The parties to any hearing before the MICHIGAN BOARD OF NURSING may, by a stipulation in writing, filed with the MICHIGAN BOARD OF NURSING, agree upon the facts or any portion of the facts involved in the controversy, which stipulation shall be regarded and used as evidence on the hearing. Parties are requested to thus agree upon the facts whenever practicable.

VIII. Depositions shall only be taken upon written authority of the MICHIGAN BOARD OF NURSING where it is proved in writing to the MICHIGAN BOARD OF NURSING that it is impractical or impossible to otherwise obtain the evidence. When depositions are permitted, they shall be taken according to the rules for taking depositions in civil cases in the State of Michigan, being Michigan Statutes Annotated, 27.854, et seq., with all parties given an opportunity to cross-examine the witness under oath.

(Note: Unless there are objections registered with the MICHIGAN BOARD OF NURSING within ten (10) days after date of publication, this procedure will be accepted.)

HERE'S THE ANSWER

"Are there any legal implications when a practical nurse administers drugs to the hospital patients?"

Under the Uniform Narcotic Drug Act (Mich. Stats. Ann. Section 18.1077 (1), a physician or a dentist may cause narcotic drugs "to be administered by a *nurse* or intern under his direction and supervision." An opinion of the attorney general of Michigan, dated Sept. 27, 1945, advises that the above quoted section applies to both registered and non-registered nurses. In other words, the generic term "nurse" applies to practical nurses as well as registered professional nurses. In our opinion, therefore, a practical nurse can administer drugs to patients under the supervision and direction of a physician. If such administering is performed in a negligent manner which causes injury to the patient, the nurse is liable for any injuries caused to the patient. Since a practical nurse can administer narcotic drugs under the supervision and direction of a physician, it would stand to reason that she could also administer less harmful drugs under his supervision and direction.

— James J. Wilson
Legal Counsel, MSNA

DISTRICT NURSES ASSOCIATIONS—PRESIDENTS and TREASURERS as of OCT. 15, 1954

(City is the same as district unless otherwise stated)

DISTRICT	PRESIDENT	TREASURER
Alpena	Mrs. Virginia Fairman, 751 State St.	Mrs. Angie Burkholder, 143 State St.
Battle Creek	Edna Jenning, 57 E. Kingman St.	Gemma Maddalena, 388 W. Van Buren Ave.
Bay City	Sister Mary David Crower, R.S.M., 203 — 15th St.	Ethel Geboski, 1121 S. Van Buren St.
Branch	Veneta Smith, 312 E. Chicago St., Coldwater	Mrs. Mildred Flower, 84 E. Pierce St., Coldwater
Cadillac	Mrs. Claudine Gilliam, Lake City	Mrs. Evelyn Nye, 227 E. Main St., Manton
Delta	Cora Peltier, 1219 N. 16th St., Escanaba	Mrs. Jean Seymour, 913 S. 18th St., Escanaba
Detroit	Harriet Russell, 51 E. Willis Ave.	Mrs. Thelma Brewington (Exec. Dir.) 51 W. Warren Ave.
Dickinson	Mrs. Ardis Larsen, 309 Meridan St., Niagara, Wis.	Mrs. Dorothy Anderson, 631 E. "C" St., Iron Mountain
Flint	Mrs. Ethel MacLennan, 637 Eldridge St.	Mrs. Jayne Bock, 3506 Lawndale Ave.
Grand Rapids	Waunda Wyndle, 300 Bostwick St., N.E.	Mrs. Henrietta Dudek, 2445 Wykes St., S.W.
Gratiot	Mrs. Aleta Parkhurst, 211 River Court, St. Louis	Mrs. Lillian Wood, 305 Elwell St., Alma
Hillsdale	Mabel Erickson, 125 State St.	Mrs. Annie McElroy, 41 E. Hallett St.
Houghton	Jean Eliasson, 89 — 3rd St., Laurium	Mrs. Mary Adams, 408 Reservation St., Hancock
Huron	Mrs. Doris Kellermann, Elkton	Mary Kauffman, Pigeon
Jackson	Catherine Thorpe, 1603 Lansing Ave.	Mrs. Ruth Gehringer, 120 North Higby
Kalamazoo	Elizabeth Vanden Bossche, 610 S. Burdick Ave.	Eleanor Maguire, 628 S. Park St.
Lansing	Mrs. Phyllis Rein, 1312 Woodbine St.	Mrs. Catherine Harrison, 145 Isbell St.
Lenawee	Mrs. Mildred Schmidt, 2097 Mills Road, Manitou Beach	Margaret Mobler, Nurses' Home, Bixby Hospital, Adrian
Ludington	Mrs. Ella Johnson, Paulina Stearns Hospital	Dolores Matson, 601 E. Foster St.
Manistee	Mrs. Juanita Berryhill, Route 1	Mrs. Rosalyn Rozmiarek, 113 Walnut St.
Marquette	Mrs. Lavinia Knight, 416 W. Ridge St.	Mrs. Loris Carlson, 514 W. Kaye Ave., Apt. 43
Menominee	Carolyn Bruemmer, 300 — 44th Ave.	Margaret Mullins, 821 — 1st St.
Midland	Eugenia McPhillips, 1602 W. Hines St.	Geraldine Ulanowicz, 613 E. Carpenter Ave.
Monroe	Mrs. Laura Fraser, 429 N. Monroe St.	Mrs. Wilma Karian, 307 E. Lorian St.
Montcalm-Ionia	Mrs. Lila Simmons, 214 E. Congress St., Belding	Mrs. Harriet Sellevaag, 414 N. Lincoln St., Stanton
Muskegon	Mary Eyke, 1521 Jefferson St.	Mrs. Petrina LeCompte, 1838 Sanford St.
Newberry	Marie Elsner, State Hospital	Mrs. Ellen Dennis, State Hospital
North-Central	Mrs. Ethel Guggisberg, 111 W. Second St., Gaylord	Reginia Krause, Northern Michigan Tuberculosis Sanitarium, Gaylord
Nottawa	Mrs. Bernice Michael, 571 Willow Drive, Colon	Mrs. June Lewis, 603 Elm St., Three Rivers
Oakland	Mary Wenzl, 511 Hanna St., Birmingham	Mary Millenback, 40 Murphy St., Pontiac
Oceana	Mrs. Dorothy Bucher, Route 1, Shelby	Mrs. Emily Dewyer, Pentwater
Ottawa	Doris Wieskamp, 96 E. 21st St., Holland	Nella DeJongh, 20 E. 14th St., Holland
Petoskey	Avis Sadler, Alanson	Mrs. Bonda Hale, 816 State St., Boyne City
Port Huron	Mrs. Greta Gillow, 1418 Pine Grove Ave.	Mrs. Marie Joslyn, 1271 N. River Road, St. Clair
Saginaw	Lois Duff, 723 S. Bond St.	Marie Phillips, 219 John St.
St. Joseph	Elsie Logan, 31 N. St. Joseph, Niles	Dorothy Snow, 1003 McAllister St., Benton Harbor
Sault Ste. Marie	Mrs. Marjorie Mendicino, 1109 John St.	Mrs. Helen Murphy, Route 2, Box 120
Shiawassee	Mrs. Irene Hosking, Route 1, Owosso	Mrs. Elizabeth Captain, 123½ W. Main St., Owosso
Traverse City	Mrs. Ruby Green, 819 Carver St.	Mrs. Blanche Henry, 200 W. 7th St.
Van Buren	Mrs. Marilyn Heckens, Route 2, Bangor	Mrs. Viola DeHaven, 430 Lyon St., South Haven
Washtenaw	Catherine Dohm, 3524 Edgewood, Ann Arbor	Mr. Joseph Melling, 1206 Wright St., Ann Arbor

IS MEMBERSHIP AS GOOD AS YOU CAN MAKE IT?

Membership By Sections as of July 31, 1954

ANA		Percentages
GDN	54,451	33.3
PDN	45,207	27.7
INSA	22,962	14.0
SG and Industrial Nurses Section Combined	18,431	11.2
PHN	13,722	8.4
EACT	8,917	5.4
Total	163,690	100.0

Not indicated: 1,444

MSNA		Percentages
GDN	2,576	37.1
PDN	1,296	18.7
SG including industrial nurses	1,028	14.8
INSA	964	13.9
PHN	670	9.7
EACT	401	5.8
	6,935	100.0

Associate members: 379

According to the table on the number of professional nurses actively registered in Michigan, there are 14,472 nurses currently engaged in nursing or related fields. You will note that the GDN and INSA are grouped together under Hospital Staff. Otherwise, the section potential is evident.

If *each* 1954 MSNA *member* would "bring in" just *one new member* in 1955, we'd really go over the top. Let's try!

YOU ARE THE MSNA

To What Extent Have You Participated in 1954?

Were you a district, state, or national officer?

Have you been an active participating member of a committee or committees?

What did you contribute to section activities, to regional conferences, to program meetings?

Hundreds of nurses have given volunteer service to the organization. Why not *you?*

What Has The Association Offered You?

Proposed personnel policies (revised for three of the state sections in 1954) for good employment conditions.

Group benefits for your health and security: Blue Cross-Blue Shield hospital, retirement income, sickness-accident benefit, and professional liability insurance plans.

Services of legal counsel on professional problems — obtained by contacting MSNA Headquarters.

Educational opportunities: conferences, programs, and convention. Scholarships available for post-graduate study.

The MICHIGAN NURSE brings you information.

State headquarters staff carries out the decisions of your officers and committees; responds to inquiries; and channels information.

State sections — discuss mutual problems regarding your occupational field.

Speaks for you in regard to legislative action concerning general health and welfare programs.

Co-sponsored a study of nursing needs and resources.

What Can You Do To Have A Better District, State, And National Association in 1955?

Pay dues promptly
Participate in activities
Extend a cordial welcome to new members
"Sell" the association to others

ANA Guide Lines — "You are selling a product. Is it as good as you can make it?"

HOW TO JOIN OR RENEW MEMBERSHIP

To Be Eligible: You Must Be a Graduate Professional Nurse Registered in Some One State.

I. ACTIVE MEMBERS

In a district having its own association:
Pay to the District Treasurer the sum needed for all dues.

American Nurses' Association (including ICN dues)	$5.00	
State	8.25	$13.25
Local dues (set by District)		

In areas where there is no District organized:
Pay to the State office a total of $13.25 as an individual member.

II. ASSOCIATE MEMBERS

Nurses not employed in nursing for more than 30 days a year may, if they wish, join as associate members. Pay to the District Treasurer the sum needed for all dues.

National (ANA)	$1.25	
State	1.50	$2.75
Local dues (set by District)		

In areas where there is no district organized:
Pay to the State Office a total of $2.75 as an individual Associate Member.

Associate Members receive the MICHIGAN NURSE, but are not eligible for MSNA group rates in the Blue Cross, nor for Group Sickness and Accident Insurance.

"SOME THOUGHTS FOR THE FUTURE REGARDING THE NURSE'S UNDERSTANDING OF THE PATIENT"

Excerpts of Address by EMIL M. ISBERG, M.D.
Assistant Professor, Dept. of Psychiatry and Internal Medicine, University of Miami, Florida

My thoughts for the future are concerned with the psychological aspects of nursing. In the olden days, the psychological portion of medicine and nursing known as "the bedside manner" or "the art of medicine" or "the art of nursing" was all-important, for the healing effects of nurses and physicians in those days actually stemmed from the emotional support they unawaredly gave the patient. This old, human approach to the patient is now being revived, but the revival is taking place in a new scientific form. Intuition is being replaced with scientific concepts which are valid explanations of human behavior. The nurse of the future should be able to observe the behavior of the patient in his illness, and recognize what inner needs are pushing him into his particular actions. She will attend the emotional as well as the physical needs.

When physical illness happens to any one of us, one naturally feels threatened by such an adverse occurrence. By and large, most of us make a satisfactory adjustment to any significant change in our physical state, but there are persons who react with anxiety and disability entirely disproportionate and inappropriate to the actual extent of their physical disease.

The most common defense utilized by the person who is anxious because he is sick, is that of regression. This patient tends to resolve his anxiety by reverting to a childlike helplessness; he becomes all wrapped up in himself and his world narrows down to himself and his immediate needs. This patient behaves like a demanding, intolerant, petulant child.

Then there are other patients who in sickness behave in a diametrically-opposite way; they do not permit themselves the slightest kind of regression into the dependency of illness. Yet, they too are anxious and insecure.

There are other patients who become "experts" on their physical disease. These "experts" are coping with their anxiety by externalizing it away from themselves; this is the defense of intellectualization.

There are patients whose character structure is such that they cannot take responsibility for their part in whatever adversity befalls them, and so when sickness befalls them they handle their anxiety by finding a scapegoat upon whom they blame all their woes; all too often it is a nurse who is chosen for such a specious honor. This behavior is known as the defense mechanism of projection.

The patient with the greatest challenge to a nurse's understanding of behavior, is the one who acts defiantly, rebelliously, and uncooperatively; the one who resists and thwarts every effort in his behalf. This is often a cover-up of a personality conflict.

The psychologically-enlightened nurse is aware that an individual's personality is also markedly influenced by the cultural group to which he belongs, and that humans from different cultures differ in customs, values, and behavior. The American culture feels that it is admirable to carry one's own burden of grief and suffering, to smile bravely when ill, and to be a good self-sufficient patient. But people of some other cultures would look upon such behavior as depriving others of their right to help the sick one; other cultures feel that grief and pain must be shared.

The nurse who works with children especially should have an understanding of personality development, for she automatically is involved with the personality development of the children she attends; and she influences, for better or for worse, intentionally or unintentionally, the personality growth of children. An enlightened nurse can do much to alleviate the separation anxiety of the child, and she can transform a potentially adverse experience into a positive growth experience for the child.

Now, let us see what can be done for the patient by the nurse who is able to recognize anxiety, defense mechanisms, and emotional needs. Let us take up again the person who reacts with excessive regression. He direly needs warm, friendly, strong support. This kind of supportiveness utilizes interpersonal means which help the patient to feel more secure, protected, safe, and less alone.

The nurse must also be aware that prolonged supportiveness may infantalize the patient, may make a persistent baby out of him; and good nursing next attempts to help the patient grow up again after the acuteness of the illness has subsided. To achieve this end, the nurse does well by cultivating as her attitude, all the attitudes that characterize the helpful, mature parent. A good mother is supporting but not over-protective, sets limits to unacceptable behavior, points out mistakes, is not frightened by threats, is firm without being hostile, gives respect and acceptance, and expects a growth in self-reliance—the same goes for a good nurse.

These are the attitudes which make for a solid nurse-patient relationship, and it is on the basis of such a relationship that a nurse fosters good health in her patients. Naturally, these are the attitudes of my ideal nurse of the future.

Patronize Our Advertisers

VOLUNTEERS COMPLETE MEDICAL CIVIL DEFENSE COURSE

By ROBERT E. SMITH, ADMINISTRATOR
Medical and Public Health Division
Detroit Office of Civil Defense

Another year of effort by physicians and nurses interested in the casualty problem related to the atomic threat has reached a successful conclusion with the granting of certificates to volunteer civil defense workers who have completed a year's course in casualty care and the operation of a casualty care station.

This is the basic civil defense medical course given under the auspices of the Civil Disaster Committee of the Wayne County Medical Society. It is designed to produce a cadre of medical aides capable, not only of assisting physicians and giving routine ward care with some degree of competence, but also serve as a core of leadership around which a full complement of volunteers can be built at the time of disaster. The course also gives the civil defense worker a thorough briefing in the provisions of the metropolitan plan for organization of the target area for coherent inter-service action to bring rescue and definite medical care to 150,000 to 200,000 casualties within the space of a few hours; a tremendous, almost incomprehensible problem. The solution would require the maximum effort of 40,000 dedicated and determined volunteers, including all of the physicians, nurses, and related professional groups in the state.

The current training program has involved activation and maintenance of a nucleus staff in eleven casualty care stations (elementary and intermediate schools — combined bed capacity 15,000). Enrollment last year reached 2,000, with attendance per meeting varying from station to station from 30 to over 100. For training purposes, activation of a casualty care station consists of opening the station for one meeting per month during the school year for instruction and practice under the direction of the physician station leader.

This is a small scale program in relation to total needs. However, as such, it has had the important advantage of permitting easier adjustments in the training program as experience indicated desirable. In fact, until such experience was gained, the feasibility of a large scale volunteer training program was open to question. It appears that the recruiting, training, and maintenance of a full personnel complement for each casualty care station (515 per station) is neither desirable nor practical at any time. The immediate objective is rather to expand the training base: to cover as many stations as possible with a cadre (total designated casualty care stations in the Detroit area — 68; total bed capacity, 130,000) of trained volunteers.

In view of this objective, all volunteers received the same instruction and text material. Each volunteer is thereby trained in the total casualty care station operation and should, as a result, be assignable to any position in the casualty care station commensurate with his strength and ability.

At the final meeting of the year, an examination was given to all volunteers to determine the degree of absorption of material presented during the year. The test consisted of 49 short answer questions. Sample questions: (1) "Check seven of the following symptoms that characterize shock." (2) "In the treatment of shock, there are five standard steps to be taken; check these five." Resulting scores were high, indicating that the calibre of the active volunteer in civil defense is high; and also indicating that these people do read the text material given to them, and do listen intently to the lectures.

Because of its evident success and the continuing need, the current training program will continue and be augmented in the school year beginning in September. Plans call for the activation of twenty additional casualty care stations. It scarcely need be pointed out that the possibility of initiating an expanded program is totally dependent upon physician support. A physician to act as leader in each station is indispensable. The present material will be repeated for new recruits. An advanced course is being devised for volunteers who have completed the first year.

Time has been on our side. Time to organize, to recruit and train; time also to assimilate the vast implications of the atomic threat and time to hammer out basic policies logically fitting the hard facts.

(Editor's Note: This article appeared in the "Detroit Medical News," August, 1954.)

Did You Know?

"In the United States in 1953, Michigan* ranked seventh in the total number of registered nurses employed, fourth in the number of industrial nurses, and ninth in the number of public health nurses."

(*almost 16,000)

"Our hospitals employed a total of 10,889 professional nurses and 13,505 non-professional nurses."

"In 1953, Michigan's nursing service needed 2,700 additional professional nurses to fill the vacant positions in hospitals, doctors' offices, to fill the calls for private duty nurses, and to provide one public health nurse for every 5,000 Michigan residents."

"A shortage of 5,000 nursing personnel is found to exist."

From: "For Better Nursing in Michigan" — A Survey of Needs and Resources, 1954.

ANA GUIDE LINES

Few Nurses Protect Themselves Against Liability

Only a small percentage of nurses in ANA have taken advantage of the professional liability insurance available to them through the association. This, despite the continuing tendency for the public, the courts and juries to hold nurses liable for their professional acts involving alleged negligence.

This insurance has been available with St. Paul Mercury Indemnity Company.

This protection is inexpensive; it meets a need of nurses today.

Nurses' Economic Interests Affected by Legislation

In promoting the economic security program, nurses must be alert to social and labor legislation which will affect them. ANA follows federal laws of this kind while SNA's keep in touch with state proposals.

Unemployment Insurance — The new Security Administration Financing Act has set up a $200 million reserve fund out of current excess payroll tax collections from which loans can be made to states with high unemployment.

Sections In The Fabric of ANA

The regional workshops on section organization in 1953 brought one response from many of the ANA members who participated: "Now for the first time I realize I am the ANA!"

From time to time since 1916, when ANA's first section was started, sections have been formed within the parent organization in response to a need to pursue issues which related particularly to one occupational group. In 1952, the objective of giving every ANA member the opportunity to participate actively and democratically in shaping the direction in which her practice is developing, was provided in the plan for seven national sections.

SNA Section Chairmen Polled For 1955 Workshop Plans

Subjects receiving the most votes in a nationwide poll of SNA section chairmen to determine program content for the 1955 regional section workshops are:

- Programs for meetings
- Functions, standards, qualifications
- Differentiation between section and district activities
- Specifics and "know-how" of state and district organization.

ANA's International Program

The Standing Committee on Nursing in International Affairs met Sept. 22 and 23 in New York. This new group carries out the functions of three former committees: the Florence Nightingale International Foundation Committee, the National Committee on Education, and the Committee on International Nursing Relations.

CARE Nurses' Book

Through the CARE program, nursing, textbooks are sent to schools of nursing and to other nursing groups in the underdeveloped areas of the world. At the present time, more requests are received than can be filled.

Any funds that SNA's and DNA's can raise to contribute to CARE for this program will fill an urgent need.

CARE will, on request, supply you with a list of "Projects" from which you can make a selection. Write to: CARE Nurses' Book Program, 660 First Avenue, New York 16, N. Y.

Interest Continues to Increase in Exchange Program

During the first eight months of 1954, ANA's International Unit received 211 applications for placement under the Exchange Program. Applications came from nurses in 24 countries. Eighty observation itineraries have been arranged.

Last year 170 applications for placement were received from 28 countries, and 45 observation tours were planned. The increasing number of nurses interested in opportunities outside their own countries reflects the increase in the total international exchange program.

The ANA, as an authorized sponsor of the Exchange-Visitor Program, has this year made arrangements in the United States for 92 nurses from 20 countries. There are 16 American nurses abroad, the largest number in England. Ten more applications are in process. Do the nurses in your state know about this program? A pamphlet, "Your Cap is a Passport" giving details of the Exchange Program, can be obtained by writing to the International Unit of ANA.

The policies of ANA in its international affairs are the actual implementation of the last four planks as they appear in the Platform for 1954-1956 under the heading which reads: "Promote better health care for the peoples of the world."

SNA's and DNA's can further this program by developing interest in nursing in other parts of the world and specifically by helping nurses from abroad who may be located in your areas. Ways in which this can be done are to invite them to meetings, conferences, and workshops and to give individual assistance in their orientation to our hospitals and nursing methods.

International Nursing Review

Information on nursing activities around the world can be found in the "International Nursing Review", formerly known as "The International Nursing Bulletin", the journal of the ICN. The annual subscription rate is $1.00, and it can be obtained by writing to ICN at 19, Queen's Gate, London, S.W. 7 England.

New Handbook Available

A handbook, "Mobilizing Your Personal Resources for Better Patient Care", prepared by the Office of Defense Mobilization Health Resources Advisory Committee, is available from the Superintendent of Documents, Government Printing Office, Washington 25, D.C., at 40 cents per copy.

Social Security Changes

Leaflets explaining 1954 amendments to the Social Security Law now are available and can be secured at local offices of the Social Security Administration.

HIGH POINTS OF "BEING A PROFESSIONAL PERSON"

HARLAN C. KOCH, Ph.D.

Professor of Education, Assistant Dean School of Graduate Studies, University of Michigan

Michigan State Student Nurses Association Luncheon, Tuesday, November 2, 1954

The evolution of a profession is a slow, tortuous process which cannot advance more rapidly than the basic sciences upon which it rests nor more rapidly than its members comprehend its potentialities and strive to achieve them, on the one hand, or society comprehends the character of the profession and accepts its services, on the other. Thus, the lag in such an evolution is primarily psychological and not technological in character.

Since a profession exists only to benefit the individual, recognition of that fact will advance both the profession and the practitioner and, of course, the welfare of the client.

Every profession is essentially a person-to-person relationship. One can be rigidly professional within the ethics of the profession and still be somewhat less than professional in the practice of his calling as an art. Since there is no "science" of nursing, nursing is an art which may be defined as the way in which the nurse applies her scientific training. Such an application should be characterized by a glow of warm understanding between her patient and herself. This glow of understanding can be brought about by the endeavor to treat her patient not as "the tumor in Room 1223", but as "Citizen Smith in trouble." She can approach this concept of patient-nurse relationship by comprehending that Citizen Smith is a unique personality. Someone has said that, "As you know a person better you will love him more; and loving him more you will serve him better." This point of view is not mawkishly sentimental but soundly therapeutic.

Reciprocal benefits are bound to accrue when the nurse operates within the warm matrix of personal understanding and appreciation. If one's occupation is the watershed down which all the rest of one's life tends to flow, one must expect one's personality to be affected by that fact. Therefore, the nurse owes it to herself to regard her patient as a person of inestimable worth for the effect it will have upon the deeper levels of her own personality. Such an understanding of her calling means that she must make "a complete adaptation to (her) task, an adaptation that is far from being intellectual."

"When I use a word," Humpty Dumpty said, ". . . it means just what I choose it to mean — neither more nor less." So can the individual nurse, like Humpty Dumpty, make the expression, "a professional person" mean anything that her comprehension of her calling will allow.

STUDENT CORNER

The "Student Corner" would like to dedicate this editorial to the nursing profession.

Recent studies in nursing have brought to light the fact that we need more nurses, more than we can educate in existing facilities. We, both students and graduates of the nursing profession, should be proud to know that we are so desperately needed; and knowing this, do our best to make our chosen field appeal to prospective students.

As a nurse, it is important to know the characteristics of a profession in order to live up to its expectations and to achieve the honor that it holds for the professional woman. According to Florence C. Kempf, R.N., A.M., professor of nursing education at Michigan State College, several of these are:

"1) A profession demands of its members intellectual action accompanied by individual responsibility.

2) A profession requires of its members conclusions based on experiment and truth in laboratory research.

3) A profession requires of its members agreement upon aims with sound underlying theory which have been proven in practice.

4) A profession is identified by techniques which may be communicated through special education.

5) A profession requires its members to take part in organized activities, to assume responsibilities, and to develop a sense of group consciousness.

6) A profession requires that its members be sincere in the public interest, seeking the social good; that their lives reflect the conviction that the dignity of the individual and the brotherhood of man are of paramount importance."

These are the ideals that we all hope to acquire in order to succeed and keep up with the trends in modern nursing.

— Diane Rochester
Carole Kepner
Student Nurses
Michigan State College

*"The Person As A Nurse" — Florence C. Kempf — used with permission.

We hope to hear from more of the districts and individual schools this month in order to bring some personal news of interest to your column. How about letting us know what happened at your last organizational meeting?

Read the ads.

AN INCREASE OF 16,000

Nearly 400,000 nurses — an increase of 16,000 since 1950 — are now working in the U.S., according to new figures announced today by Surgeon General Leonard A. Scheele of the Public Health Service, U.S. Dept. of Health, Education, and Welfare. Estimates on the latest available figures from the 48 states and District of Columbia show a total 389,600 professional nurses in active practice in the nation. However, the demand for nursing services is so great, Dr. Scheele said, that the present recruitment goal for the nation as a whole is 55,000 student nurses a year.

The number of hospital nurses, the largest single group, has increased by 15 per cent in the last four years to a total of 231,000. Private duty nurses, the next largest group, who are also at the bedside, number 74,000. The 35,200 nurses working in doctors' offices, 25,300 public health nurses, 14,000 industrial nurses, and the 8,200 nurse educators in schools of nursing make up the remainder of the total, along with 1,900 nurses in a variety of other fields.

The ratio of all nursing personnel, including student nurses in general hospitals, has risen from 69 per 100 patients to 74 per 100 patients since 1950 — making it the highest in history.

"The steady rise in the nurse supply of the nation is significant to the total health picture", Dr. Scheele pointed out, "because nurses play such a vital part in all phases of our national health. For that very reason, the nursing profession today offers a wide variety of excellent opportunities in the field of public health, in hospitals, schools, industry, doctors' offices, and, of course, in our schools of nursing."

— U.S. Department of Health, Education, and Welfare

NURSE HEADS MSC COURSE

Mrs. Iva June Corbin, former director and instructor of the Lansing Practical Nurse Center, was appointed instructor for the Michigan State College course for owners and operators of nursing and convalescent homes.

The course of study, conducted in cooperation with the Michigan Department of Social Welfare and the Michigan Association of Approved Nursing Homes, will be held locally every Wednesday at the Goldberg School from 3:30 to 5:30 P.M., and from 6:30 to 8:30 P.M.

— Detroit Times

WESTERN RESERVE OFFERS

Western Reserve University, Cleveland, Ohio, is offering two special fellowship grants for advanced study at Frances Payne Bolton School of Nursing.

Announced by Dean Elizabeth K. Porter, the fellowships will be given for one year each, to nurses wishing to do graduate study leading to a master's degree in the field of hospital nursing service administration.

Under the fellowship program, supervised work experience is provided in accordance with professional and educational background. A maximum of 18 to 20 credit hours may be taken by fellowship recipients, with each grant being valued at $2,700.00.

Complete information on available fellowships may be obtained from the Director of Admissions, Western Reserve University, Cleveland 6, Ohio.

THE AMERICAN NATIONAL RED CROSS

Basic home nursing skills can be learned virtually as well by home television as in the classroom, according to a comparison study recently completed for the American Red Cross by Dr. Benjamin Shimberg of Educational Testing Service, Princeton, N.J.'

Recognizing the shortage of qualified home nursing instructors in sparsely settled areas, the Red Cross requested the study to find out (1) whether TV could be used successfully to teach home nursing to adults viewing the course at home, and (2) how television results compared with conventional classroom results.

The twice-weekly nursing lessons were telecast over the University of Houston educational channel KUHT, under sponsorship of the Central College of Nursing of the University of Houston, which turned over its television time to the Red Cross so the experiment might be carried out.

AIR FORCE NURSE CORPS

Air Force Nurse overseas' returnees this month include Captain Charlotte Stein, 14891 Penrod Ave., Detroit, and 1st Lieutenant Marie Sinnett of 1820 Baldwin Ave., Detroit. Both nurses are graduates of Providence Hospital.

Captain Stein has been on duty at the Air Force Hospital, Elmendorf, Alaska, since 1952 and will assume new stateside duties at Carswell Air Force Base, Tex. She has been on continuous active military duty since 1943.

Returning from a different part of the globe is Lieutenant Sinnett. She has been serving in the Air Force Hospital at Clark Air Force Base, Philippine Islands since June, 1953. Lieutenant Sinnett was commissioned in the AFNC in 1952. Her new assignment is at Wright-Patterson Air Force Base, Ohio.

ARMY NURSE CORPS

Major Lucia E. Turunen, Detroit, has recently completed a tour of duty at Fort Knox, Ky., and has been assigned to Camp Rucker, Ala. She is a graduate of Michael Reese Hospital School of Nursing, Chicago, and entered the ANC in May, 1943.

Major Rose E. Ameel, Detroit, will spend the next two years in Hawaii, after completing a tour of duty at Fort Monroe, Va. She has been a member of the ANC since June 1943 and served in the European Theater during the war as chief nurse of the 225th Station Hospital. She is a graduate of St. Joseph's Hospital, Mt. Clemens, Mich.

Major Beatrice Mae Bosley, Akron, Mich., will leave in December for a tour of duty in Europe. She has been a member of the ANC since May, 1941. At one time, she served as assistant chief nurse of Percy Jones Army Hospital, Battle Creek. She is a graduate of the University of Michigan School of Nursing, Ann Arbor.

District News

Alpena

Mary Hauck, Hebron, N.D., has replaced Zona Lee Wilson as director of nurses at Alpena General Hospital. Miss Wilson is now at Butterworth Hospital, Grand Rapids.

Hazel Quantz and Donna Rowan have recently joined the staff at Alpena General Hospital.

Mary Lou Lince, the recipient of the seventh scholarship given by the district association, is attending the Bay City Mercy Hospital School of Nursing.

Plans are being made for the November Benefit Card Party for the scholarship fund.

— *Jean Niergarth, R.N.*

Battle Creek

A "Broad View of the Practical Nurse Program" was the topic of discussion at the October meeting. Panel participants were: Nellie Koster, director of Oaklawn Hospital, Marshall; Gertrude O'Shaughnessy, director of the Battle Creek Practical Nurses School; Mrs. David Rathbun, chairman of the Practical Nursing Board; Mrs. Henery Haan, coordinator of student program; and a practical nurse student.

The private duty nurses held their meeting Oct. 18. Mrs. Clara Herl and Mrs. Hazel Carter attended the Private Duty Regional Conference in Jackson Sept. 24.

The nursing staff of the Public Health Dept., began a series of staff-education meetings on maternal and child care. Josephine Brown, Edna Jennings, and Margaret Donahue attended the Supervising Nurses Workshop at Kellogg Center, East Lansing.

A survey of Nurse Utilization Program sponsored by the Kellogg Foundation is being done in Community Hosiptal. New staff members at "Community" are: Mrs. Helen Pollock, Mrs. John Benda, Joyce Ferris, and Mrs. Vincent.

Nursing staff changes at Veterans Hospital include: Ruth Veldt, who has joined the staff; Mrs. Cena Gibbs, who has retired and is now living in VanderWagen, New Mexico; and Mrs. Evelyn Miller, who has resigned and plans to operate a nursing home in Nashville, Mich.

Mrs. Jean Turner is now the assistant director of nursing at Arthur S. Kimball Sanitarium.

— *The Lamplighter*

Bay City

The October meeting proved to be very interesting. Mrs. Emma Antcliff, assistant executive director of MSNA, included in her talk a preview of the state convention.

On Oct. 13, the district held a smorgasbord supper at the Bay City Country Club to celebrate their 50th anniversary. About 200 persons, mostly nurses and doctors, enjoyed the social hour and supper. A cleverly planned skit, which included uniforms from each era of nursing, and the forecast of the future was presented as part of the entertainment for the evening.

We had among our guests for the evening, Mrs. Edna Ashmun Rae, who has given 54 years of nursing service to the community, and who is listed among the 15 oldest active nurses of the state.

Harold Schaefer, M.D., spoke on "Nursing Care in Acute Heart Diseases" at the November meeting.

— *Margaret J. Perrin, R.N.*

Branch

Elsie M. Brown was elected to replace Frances Bressler on the Recruitment Committee, and Lydia MacDonald was elected to replace her on the Board of Directors as a result of the vacancy caused by her death early this summer.

The theme of the meeting was, "Industrial Health Program" and was discussed by members of the district.

— *Mrs. Mary Lou Hansen, R.N.*

Delta

Mrs. Emma Antcliff, of the Headquarters Staff, and Mrs. Dorothy Butterfield, chairman of the Private Duty Section of MSNA, were unexpected guests at the last regular meeting of the Delta District. Also guests at the meeting were nurses from the Manistique area. Chief topic of discussion was the possibility of a merger between the Delta County and Schoolcraft County areas. Mrs. Butterfield spoke briefly of the need for private duty nurses to meet together, present their problems, and receive aid from MSNA.

Dr. Thomas A. McInerney, Escanaba, gave an interesting and enlightening talk on "Diabetes."

St. Francis Hospital, Escanaba, has recently completed one phase of their remodeling program.

On Oct. 22 a meeting was held at Lee Hall, Northern Michigan College of Education, Marquette, to discuss the organization of a Michigan League for Nursing in the Upper Peninsula.

— *Elizabeth Nelson, R.N.*

Detroit

The Detroit Committee on National Nurse Week chose to honor Doris Beach as the Professional Nurse of the Week. Miss Beach is an assistant head nurse at Henry Ford Hospital.

Hillsdale

After the September meeting, those attending visited the Rural Fire Dept. to see the rescue squad equipment.

— *Nancy J. Baker, R.N.*

Houghton

The St. Joseph Nurses Alumnae of Hancock held a picnic at the George Kirkish cottage Sept. 14. Fifty-one members attended this bi-monthly meeting.

Jackson

Election of officers took place at the regular annual district meeting.

Regular meetings are to be held monthly on the second Monday; and a series of lectures by specialists has been arranged to be given on the fourth Monday of each month for six months. At the end of this time, a one-day institute will take place.

— *Sister Mary Josephine, R.S.M.*

Lansing

Dr. LeMoyne Snyder, lawyer, doctor, and nationally known criminologist, described the work of "The Court of Last Resort" at the September meeting.

The public benefit for the scholarship fund scheduled for October has been postponed until March. On Oct. 5, the Scholarship Committee sponsored a silver tea in the nurses' lounge at the Edward W. Sparrow Hospital School of Nursing.

"Your Social Agencies" was the topic presented by Mrs. Gladys Spaulding, director of the local Family Service Agency at the Oct. 14 meeting.

Several district members attended the Public Health Supervising Nurses Workshop Sept. 29-Oct. 1, at Michigan State College; the Practical Nurse Schools Evaluation Conference, Higgins Lake, Oct. 6-8; the Institute on Maternal and Child Care, Oct. 7-8 at Kellogg Center; and the American Public Health Association meeting, Oct. 10-14, Buffalo.

Florence Kempf, R.N., director, Dept. of Nursing Education, Michigan State College, conducted a workshop in supervision at Iron Mountain, Vet-

erans Administration Hospital, Oct. 12-14. She was also guest speaker at the Dickinson District meeting Oct. 13.

— Mrs. Lottie Horn Waterman, R.N.

Lenawee

In September, a joint meeting with the South Central Michigan League for Nursing was held in Adrian with over 125 in attendance, including: R.N.s, P.N.s, nurses' aides, and attendants.

Mr. A. Charnov, director of Emma L. Bixby Laboratory, spoke on "The Blood Bank" at the October meeting.

Future Nurses' Clubs are being sponsored in all high schools in the area. A scholarship was awarded to Nancy Darling, who has entered St. Joseph's Hospital, Ann Arbor.

Howard Eddy, M.D., Adrian, spoke at the Nov. 11 meeting on, "The Care of the Cardiac Patient."

— Mrs. Edith Guss, R.N.

Ludington

The district association held their annual picnic Sept. 20 at the Pine Knob Resort.

The proceeds of a silver tea held in the public library went to the Anna Barbara Switzer Student Loan Fund.

The Michigan State Public Health Service held a regional workshop at the Paulina Stearns Hospital Nurses' Home, Oct. 4-5. The program was, "Conference on the Care of Mothers; Full Term, New Born, and Premature Infants." The speakers were Rowena Neal and Mary P. Simmons, members of the Michigan State Health Dept.

— Mrs. Marilyn Wrede, R.N.

Marquette

A silver tea was given by the MDNA at Morgan Heights Sanatorium on the date of their open house. The proceeds, $120.00, was presented to Dr. James R. Acocks, superintendent, by Mrs. Lavinia Knight, R.N., president. This money will be used to purchase items not available under the present budget.

Four nurses attended the three-day Workshop for Supervisors at Iron Mountain, Oct. 12-14.

— Mrs. Mabel Lyons, R.N.

Menominee

Herman Brukardt, M.D., was the guest speaker at the October meeting. He spoke on the treatment and diagnosis of rectal disorders. Discussion was held on the use and misuse of trilene anesthesia in obstetrics.

— Mrs. Lorraine Krenelka, R.N.

Midland

"With One Voice," a film, was shown at the October meeting; and Eugene Perrin, Dow Public Relations Dept., spoke on "While the Doctor Is Out." Economic Security for Nurses was the theme for the evening.

Wilma Michael has joined the staff at Dow Medical Dept. Betty Sawyer Trombley has returned, and Rea Johnson is a new member of the Midland Hospital nursing staff.

— MDNA Bulletin

Montcalm - Ionia

Mrs. Emma Johnson Antcliff, of the state headquarters staff, was the guest speaker at the September dinner meeting.

C. Loyal Knappen spoke on: "Life Insurance and Budgeting" at the October meeting.

— Mrs. Lila Simmons, R.N.

Nottawa

Mrs. Harold Smith, executive secretary, Local Chapter of the American Red Cross, spoke on, "How the Red Cross Plays Their Role in Civilian Defense" at the September meeting.

The Community Health Council meeting was held Sept. 14, at the Courthouse in Centreville. Many nurses in the county are participating in the activities of this council. Mrs. Bernice Michael, R.N., is on the planning committee for a County Tuberculosis Association. Another project is a survey of the sanitation of a local lake.

The regular district meeting for October was held at Three Rivers Hospital. Audrey Marr, director of Occupational Therapy at Kalamazoo School for Retarded Children, was the speaker. Miss Marr also showed a film explaining the work of the school.

— Mrs. Betty Leister, R.N.

Oakland

The regular meeting of the association was held Oct. 19. After dinner the group enjoyed watching slides on Italy, which were indeed colorful and informative.

We are proud to announce that Margaret LaVelle was chosen "Nurse of the Week" in Oakland County during National Nurse Week. Miss LaVelle, a graduate of St. Joachian School of Nursing, Watertown, N.Y., has been on the staff at St. Joseph's Mercy Hospital, Pontiac, since 1926. Her contributions to nursing and to the community have been outstanding.

— Mrs. Bessie Antos Capsalis, R.N.

Oceana

A potluck supper was enjoyed at the summer home of Mrs. Bernice Frost, at Stony Lake. Mrs. Ruth Harrison, laboratory technician, Shelby Hospital, gave a very interesting talk on, "The Oceana County Blood Bank" at this September meeting.

— Mrs. Dorothy L. Crosby, R.N.

Port Huron

"With One Voice," the film story of the economic security program of ANA, was shown and narrated by Bess T. Mac Culloch, as part of the program of the opening fall meeting.

Mrs. Leona B. Fownes, spokesman for the district Private Duty Section, reported that it has become imperative that an official nurses' registry be established. At the October meeting, members voted to "set up" the registry as suggested in the MSNA's proposed Registry Manual. Arrangements have been made with the Physicians and Surgeons Exchange to handle the listings and calls.

Mothercraft classes will be given throughout the county by the VNA of Port Huron under the sponsorship of the St. Clair County of Social Agencies' Health Committee. As there is need for training more nurses to aid with these classes, the district members voted $50.00 to help defray the expense of sending a member (Dorothy Caughill) to Maternity Center, N.Y., for the three-week unit courses.

Beryl Brewer and Mrs. Lillian Morts, bacteriologists of the Port Huron Hospital staff, discussed newer laboratory procedures at the November meeting. A scholarship of $100.00 was voted by the members, which will be given to a student in the new nursing course at Port Huron Junior College.

— Bess T. McCulloch, R.N.

St. Joseph

The district nurses held the October meeting at Berrien County Hospital. Following the business meeting, a travelogue on Mexico was shown by Lilly Kraft of Niles.

— Joan Hild, R.N.

Shiawassee

A film was shown at a dinner meeting of the district in September. Plans were made for National Nurse Week.

— Mrs. Esther Klein, R.N.

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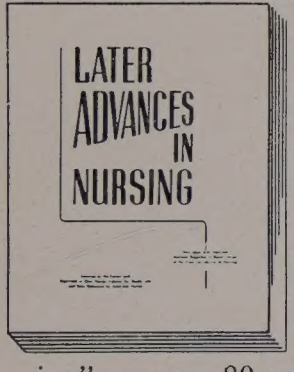

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